

EXHIBIT 8



Secretary of State
Statement of No Change
(Limited Liability Company)

LLC-12NC

18-C34495

FILED

In the office of the Secretary of State
of the State of California

JUL 10, 2018

IMPORTANT — [Read instructions](#) before completing this form. This form may be used only if a complete Statement of Information has been filed previously and there has been no change.

Filing Fee – \$20.00

Copy Fee – \$1.00;
Certification Fee - \$5.00 plus copy fee

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- 1. Limited Liability Company Name** (Enter the **exact** name of the LLC as it is recorded with the California Secretary of State. Note: If you registered in California using an alternate name, [see instructions](#).)

WEEKND XO LLC, THE

- 2. 12-Digit Secretary of State File Number**

201620410148

- 3. State, Foreign Country or Place of Organization** (only if formed outside of California)

DELAWARE

- 4. No Change Statement** (Do not alter the No Change Statement. If there has been any change, please complete a Statement of Information (Form LLC-12).)

There has been no change in any of the information contained in the previous complete Statement of Information filed with the California Secretary of State.

- 5.** The information contained herein is true and correct.

07/10/2018

Date

GLENN FRANK

Type or Print Name of Person Completing the Form

CPA

Title

Signature

Return Address (Optional) (For communication from the Secretary of State related to this document, or if purchasing a copy of the filed document, enter the name of a person or company and the mailing address. This information will become public when filed. ([SEE INSTRUCTIONS](#) BEFORE COMPLETING.)

Name:

Company:

Address:

City/State/Zip: